

1600-5646

530 Rec'd PCT/PTO 09 JUL 2002

PCT1646

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Approved for use through 10/31/2002, OMB 0651-0031

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TRANSMITTAL
FORM

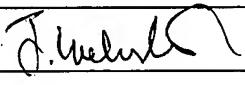
(to be used for all correspondence after initial filing)

		Application Number	10/088,724	RECEIVED JUL 10 2002
		Filing Date	03/18/2002	AUG 16 2002
		First Name Inventor	Nishimoto, I.	TECH CENTER 1600/2900
		Group Art Unit	Unassigned	
		Examiner Name	Unassigned	
Total Number of Pages in This Submission	1	Attorney Docket Number	082377-000000US	

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	1) Return receipt postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	2) One (1) reference
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. Total number of pages does not include cited references.

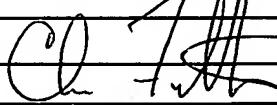
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP Joe Liebeschuetz	
	Reg No. 37,505	
Signature		
Date	July 3, 2002	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

July 3, 2002

Typed or printed name	Chris Fitting
Signature	
Date	July 3, 2002

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PA 3233852 v1



PATENT
Attorney Docket No.: 082377-000000US
Client Reference No.: KUV-102DP1PCT-
1-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Nishimoto, I.

Application No.: 10/088,724

Filed: March 18, 2002

For: HUMANIN, A POLYPEPTIDE
SUPPRESSING NEURONAL DEATH

Examiner: Unassigned

Art Unit: Unassigned

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

RECEIVED

AUG 16 2002

TECH CENTER 1600/2900

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

The reference cited on attached form PTO/SB/08B is being called to the attention of the Examiner. A copy of the reference is enclosed. It is respectfully requested that the cited reference be expressly considered during the prosecution of this application, and that the reference be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information, and no inference should be made that the information and references cited are, or are considered to be material to patentability because they are in this statement. No inference should be made that the information and references cited are prior art merely because they are in this statement.

Applicant believes that no fee is required for submission of this statement, since it is being submitted prior to the first Office Action. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

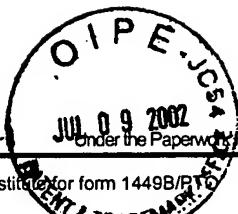
Respectfully submitted,



Joe Liebeschuetz
Reg. No. 37,505

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, 8th Floor
San Francisco, California 94111-3834
Tel: 650-326-2400
Fax: 650-326-2422
JOL:crf

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Substitute for form 1449B/PTG

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet

1

of

1

Complete if Known	
Application Number	10/088,724
Filing Date	March 18, 2002
First Named Inventor	Nishimoto
Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	082377-000000US

OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	AA	MATTSON et al., "Estrogens stabilize mitochondrial function and protect neural cells against the pro-apoptotic action of mutant presenilin-1," <u>NeuroReport</u> , 8:3817-3821 (1997).	
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			AUG 16 2002
			TECH CENTER 1600/2900

Examiner Signature	Date Considered
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

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